

Customer Name: Jason Smith

Return Level:

Basic

Interview Notes:


- Jason Smith has never been married, lives alone, has no children.
- Jason left his job at the Fast Car Company mid-year and started a new job at Brand New Day, Inc.
- Jason went to the local casino on his birthday and won \$1,450 on the slot machine and received Form W-2G. He also won \$200 but said he wasn't issued a tax form and isn't sure whether he needs to report this money.
- Jason paid student loan interest of \$2,000 and has Form 1098 E
- Jason also wants to receive any refund via direct deposit and has provided a check with the routing number and account number on it.

Social Security Card


Jason M. Smith


224-00-1234

For training purposes only

Driver's License Number T-6712345	
Name & Address Jason M. Smith 1633 Kings Road Petersburg, VA 23805	
Date of Birth 07/30/1989	Expiration Date 07/30/2025

Jason M. Smith 1633 Kings Road Petersburg, VA 23805	1234
PAY TO THE ORDER OF _____	\$ _____ DOLLARS
ABC NATIONAL BANK RICHMOND, VA 23225	
For	
012345678 1001001234 1234	

a. Employee's social security number 224-00-1234		Save. accurate, FAST! Use				Visit the IRS website at www.irs.gov/efile	
b. Employer identification number (EIN) 35-7001234		1. Wages, tips, other compensation \$13,500.00		2. Federal income tax withheld \$1,350.00			
c. Employer's name, address, and ZIP code FAST CAR COMPANY 123 MAIN STREET RICHMOND, VA 23224		3. Social security wages \$14,500.00		4. Social security tax withheld \$899.00			
		5. Medicare wages and tips \$14,500.00		6. Medicare tax withheld \$210.25			
		7. Social security tips		8. Allocated tips			
d. Control number		9.		10. Dependant care benefits			
e. Employee's first name and initial Employee's address and ZIP code JASON M. SMITH 1633 KINGS ROAD PETERSBURG, VA 23805		11. Nonqualified plans		12a. See instructions for box 12 D \$1,000.00			
		13. Statutory Employee <input type="checkbox"/> Retirement Plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b. DD \$3,000.00			
		14. Other		12c.			
				12d.			
15. State VA	Employer's state ID number 31-357001234	16. State wages, tips, etc. \$13,500.00	17. State income tax 500.00	18. Local wages, tips, etc.	19. Local income tax	20. Locality name	
Form W-2 Wage and Tax Statement				2024			
Copy B - To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.							

a. Employee's social security number 224-00-1234		Save. accurate, FAST! Use				Visit the IRS website at www.irs.gov/efile	
b. Employer identification number (EIN) 54-1001234		1. Wages, tips, other compensation \$32,000.00		2. Federal income tax withheld \$3,000.00			
c. Employer's name, address, and ZIP code BRAND NEW DAY, INC. 1415 FORT HILL DRIVE RICHMOND, VA 23225		3. Social security wages \$35,000.00		4. Social security tax withheld \$2,170.00			
		5. Medicare wages and tips \$35,000.00		6. Medicare tax withheld \$507.50			
		7. Social security tips		8. Allocated tips			
d. Control number		9.		10. Dependant care benefits			
e. Employee's first name and initial Employee's address and ZIP code JASON M. SMITH 1633 KINGS ROAD PETERSBURG, VA 23805		11. Nonqualified plans		12a. See instructions for box 12 D \$3,000.00			
		13. Statutory Employee <input type="checkbox"/> Retirement Plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b. DD \$4,000.00			
		14. Other		12c.			
				12d.			
15. State VA	Employer's state ID number 31541001234	16. State wages, tips, etc. \$32,000.00	17. State income tax 1,100.00	18. Local wages, tips, etc.	19. Local income tax	20. Locality name	
Form W-2 Wage and Tax Statement				2024			
Copy B - To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.							

<input type="checkbox"/> CORRECTED (if checked)			
PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code LUCKY CASINO 456 LOTTERY LANE CHESTER, VA 23831		1. Reportable winnings \$1,450.00	2. Date won 07/30/2024
		3. Type of wager SLOT	4. Federal income tax withheld \$.00
		5. Transaction	6. Race
		7. Winnings from identical wagers	8. Cashier
PAYER'S TIN 58-1003291	PAYER'S Telephone number 804-555-1234	9. WINNER'S TIN 224-00-1234	10. Window
WINNER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code JASON M. SMITH 1633 KINGS ROAD PETERSBURG, VA 23805		11. First identification no.	12. Second identification no.
		13. State/Payer's state identification no. VA/31-2005932	14. State Winnings \$1,450.00
		15. State income tax withheld \$52.50	16. Local Winnings
		17. Local income tax withheld	18. Name of locality
OMB No 1545-0238 Form W2-G Certain Gambling Winnings (Rev. December 2023) For calendar year 2024 This information is being furnished to the IRS. Copy B Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return.			
Under penalty of perjury, I declare that, to the best of my knowledge and belief, the name, address, taxpayer identification number that I furnished correctly identify me as the recipient of this payment and any payment from identical wagers, and no other person is entitled to any part of these payments.			
Signature:		Date:	
Form W-2G			

<input type="checkbox"/> CORRECTED (if checked)			
RECIPIENT'S/LENDER'S name street address city or town, state or province, country, ZIP or foreign postal code and telephone number LOANS FOR SCHOOL 4500 HARROWGATE ROAD CHESTER, VA 23831		OMB No. 1545-1576 2024 Form 1098-E	Student Loan Interest Statement
RECIPIENT'S TIN 45-123547X	BORROWER'S TIN 224-00-1234	1 Student loan interest received by lender \$2,000.00	Copy B For Borrower This important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.
BORROWER'S name Street address (including apt. no.) City or town, state or province, country, ZIP or foreign postal code JASON M. SMITH 1633 KINGS ROAD PETERSBURG, VA 23805			
Account number (see instructions)		2 If checked box 1 does not include loan origination fees and/or capitalized interest for loans made before September, 1 2004 <input type="checkbox"/>	
Form 1098-E (keep for your records) www.irs.gov/Form109E Department of the Treasury - Internal Revenue Service			